



Homeschool Changes in Information

Student Information:

Name: _____ Date of birth: _____

(Last, First, Middle)

Old Address: _____

City/State/Zip _____

Old Phone Number (____) _____

Old Email: _____

New Address: _____

City/State/Zip _____

New Phone Number (____) _____

New Email: _____

Please sign this form:

Print Name: _____

Signature of parent/legal guardian: _____

Date: _____

Please return by mail to the address listed below. Send **Attention: Homeschool Services**

Or this form can be faxed at the fax number listed below.